

HEALTH AND SANITATION

I. Introduction

For the purposes of this section the region has been divided into three groups: (1) the Turkic people of Sinkiang (including the Eastern Turks, Kirghiz and Kazakhs), (2) the Tibetans of Chinghai and (3) the Chinese of the Northwest (including both Hans and Moslems).

Measured by Western standards, the area as a whole lacks most modern facilities for maintaining high standards of health and sanitation. The shortage of trained personnel in the fields of medicine, dentistry and nursing is quite acute. These conditions may be due partly to the geographical location of the area, being in the deep hinterland, away from the center of China, and generally lacking a sufficient water supply. The common man's ignorance of the basic facts of health and sanitation contributes greatly to the spread of disease and to the lack of precautionary measures against the occurrence of certain diseases.

However, the local population, while living under what we consider unsanitary conditions, has built immunities to many diseases, to which a Westerner, living under the same conditions, would easily succumb. Some habits that we consider dangerous in spreading disease may actually be without any harmful consequences to the local people.

II. The Turkic Peoples of Sinkiang

A. The Diet of the Turkic People

The daily diet of the sedentary Eastern Turkis consists mostly of mutton and rice, with vegetables, both boiled and fried, including onions, potatoes, turnips, carrots and spinach, many forms of soups, and pilaus. Tea is the staple beverage, served with sugar and without milk. Bread, in the shape of circular rolls indented at the top, constitutes an important item in the diet. A variety of fruits, including melons, apples, pears, apricots, peaches, nectarines, pomegranates, plums, cherries, and mulberries, grow in profusion in Turkestan and are abundant during the summer.

The common people eat only twice during the day; in the morning and in the evening. The wealthy people frequently have feasts and eat a great abundance and variety of foods. Many of them suffer from abnormal obesity as a result of overeating and lack of exercise. A common proverb in Sinkiang warning against the folly of this type of behavior is the following, "He who eats sparingly eats ten times, but he who eats too much eats but once."

The diet of the Kirghiz and the Kazakhs, the nomadic Turks, differs somewhat from that of the sedentary Eastern Turks. Their diet is composed mainly of milk and mutton. From flour and

^N /Tibetans of Chingahi/

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*563 gories and the apportionment of the traditional Buddhist 404 is not standardized.) There are further breakdowns of what might go wrong with what aspects of the human body and the human mind or spirit, to the point where each infinitesimal ailment has its own specific cause and cure, or impossibility of curing. The medicinal treatments involve acupuncture, plasters, herbs, roots, crushed bone, excreta, potions, incantations and numerous other elements. It is a very complex system. When a Tibetan needs medical aid, he must first seek out a lama, present him with a scarf and a gift, and have this lama (who is not a doctor) cast the dice. The dice reveal the portion of the canon that contains reference to the manpa who is needed. The manpa, or specialist, may turn out to be a Christian medical missionary who has been successful in effecting cures (cf. Rijnhart, pp. 163-64). Sometimes there may be some suspicion of fee-splitting. Generally the prescriptions and treatment bear little relation to our own medical knowledge. However, the Tibetans are pragmatists and will seek their cures from those who have established a reputation for success, be they Westerners, Tibetan Buddhist or Bon doctors, or any others. Wherever Western medical science has filtered through, few Tibetans hesitate to make use of it, often simultaneously with their own. Mongol medical science is derived from the Tibetan Buddhist sources. However, more particular Mongol data on health and sanitation can be found in the IMAR Handbook.

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III. The Chinese

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*563 A. The Diet of the Chinese

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[272] The Chinese diet does not contain milk or any milk products. The usual beverage is tea. The principal animals raised for food are pigs, chickens and ducks. In the Northwest, however, mutton has become a very common dish. The Moslems substitute beef for pork. In the Northwest the main grain products are wheat and millet. Rice is also eaten in abundance, being brought generally from southern and central China. Most proteins are derived from soybeans, peanuts and sweet potatoes. The food prepared for special feasts, and the kind eaten by the upper classes, differs considerably from the average Chinese meal, consisting of at least four-fifths meat, fish or fowl. The Chinese method of cooking preserves the vitamins contained in the vegetables, since they are never permitted to linger over the fire or in water.

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*563 B. Chinese Concepts of Disease

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[146] Most of the people do not know the different values of the various food products. Although many might wish to improve their daily diet with more meats and fish, they cannot afford to do so. The people in general, and particularly in the Northwest, have no

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• [751]

/The Chinese/

N knowledge of sanitation and elementary health regulations. Their
*563 concepts of health and disease rest mainly on the traditional beliefs.
751 The concept that dominates most of their thinking about the human
[772] body and its health is that of the Two Principles of yang and yin.
S These are philosophical concepts of the origin of all things. The
563 yang principle represents the male and the yin represents the
751 female. They stand for opposite poles - heaven and earth, sun
[772] and moon, day and night, heat and cold, life and death, positive
and negative, strong and weak.

N In medicine, everything is classified as yang or yin. The
*563 exterior of the body - the skin - is yang, while the interior is
751 yin. The back is yang, while the abdomen is yin. The heart and
772 liver are yang while the spleen, lungs and kidneys are yin. A
826 disease, accordingly, is yang when due to external causes and yin
S when due to internal causes. Respiratory diseases, fever, and
563 diseases affecting the upper part of the body are yang diseases.
751 Chills and afflictions of the lower body, and circulatory diseases
772 are yin diseases. When the yin predominates, one suffers from
826 yang disease; when the yang is in excess yin results. These two
S principles must be kept in mind when treating the disease, since
[278] the drugs and herbs are also divided into these two classes.

N Another Chinese concept concerning health is that of the exis-
*563 tence of the Five Elements - metal, wood, water, fire and earth.
751 According to this belief, the human body is composed of a mixture
753 of the five elements. So long as the proportions of these five
772 elements remain in order, health results. If the balance is dis-
563 turbed, disease follows.

S These beliefs are common mainly among the uneducated popu-
751 lation, the rural and the lower classes of the urban population.
772 In most cases, the higher classes have a Western knowledge of
826 the basic elements of health and sanitation and know the basic
[184] facts of human physiology and the causes of transmission of diseases.
S Illiteracy and ignorance is much greater in the Northwest region
[212] than along the Pacific Coast. Thus, in the Northwest, the beliefs
are widespread and most Western ideas have not penetrated into
the larger part of the population.

S Unfortunately, we do not have figures on the birth and death
114 rate in Northwest China. The figures for all of China are given
162 in the chapter on "Health and Sanitation" of the General China
165 Handbook.

C. Predominant Diseases Among the Chinese

N The most common diseases are the fecal-borne ones. They are
*563 spread through the use of human waste as fertilizer. Andre Migot,
164 who travelled through Northwest China in 1946, dwells on this
364 problem in his description of a typical middle-sized town in this
S area (Tibetan Marches, p. 51): "Then there is the problem of sani-
563 tation. The total volume of human excrement produced every day
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We left Muleiho as soon as the weather permitted. 272
Our Shansi friends were round early to see how we had fared, and to bring us a parting present of a slab of brick-tea, one foot wide by one and a half feet long, and two inches thick—a most decorative object, being stamped with handsome patterns. Brick-tea is much used in the North-West. A small chunk is broken off and boiled in a kettle of water, making an infusion which is of a pale colour and nearly tasteless. The bricks are made from the used leaves of the tea-shops, sun-dried and pressed into a cake.

The next two days took us past Chitai—'Great Height'—where we stayed in the suburb, the town itself being nothing but a mass of ruins inside a good castellated wall. We took our next stage by day, crossing the area which had received the full force of the cloud-burst on Sunday night. On every hand we saw the traces of the havoc wrought. Bridges were swept away, trees uprooted and crops ruined, and we were told that a large number of cattle had been drowned, as the rushing mountain torrent burst its bounds and had overtaken the herds before their owners could get them to a place of safety. From Chitai we 361
came to Kucheng—'Ancient City'—which unlike Hami 751
is not surrounded on all sides with fertile land, but is approached over a wide, sandy and treeless plain. [33]
From out of the howling wilderness we stepped direct 366
into a large town, which appeared to us a veritable 443
metropolis. Many large shops showed a splendid 463
assortment of such glittering wares as the Chinese love—china cups and teapots, perfumes and scented soap, silks and cottons, clocks and hair-clasps. The tailors sat at their shop doors working Singers' sewing-machines, the Moslem bakers piled the hot rolls on counters as they drew them out of the brick oven, and the vege-